

Healthcare Benchmark Data Analytics Workgroup

Meeting Date	Meeting Time	Location
June 15, 2022	3:00 pm – 4:00 pm	Zoom Meeting Recording https://us02web.zoom.us/j/83470624103?pwd=UkVQVUs5UTRYRnV2SG0xbDgvUXBOdz09

Participant Name and Attendance		Council Members			
Dashni Sathasivam	X	Josh Wojcik (chair)	R	Michaela Dinan	R
Frank Mata	R	Alyne Mallory	R	Olga Armah	R
Joe Quaranta	R	Mary Lyon	R	Susan Smith	R
Others Present					
Krista Moore	R	Michael Bailit	R	Ellen Andrews	R
Hanna Nagy	R	Matt Reynolds	R	Melissa Riley	R
Kelly Sinko	R	Jeannina Thompson	R	Sandra Czunas	R
R = Attended Remotely; IP = In Person; X = Did Not Attend					

Agenda			
	Topic	Responsible Party	Time
1.	Welcome, Roll Call, and Introductions	Josh Wojcik	3:00 PM
	Josh Wojcik welcomed everyone to the second Data Analytics Workgroup meeting and invited Matt Reynolds to conduct roll call. There was a quorum present.		
2.	Public Comment	Members of Public	3:05 PM
	Josh Wojcik offered the opportunity for public comment. There were no public comments.		
3.	Action: Approval of May 12th Meeting Minutes	Workgroup Members	3:10 PM
	Joe Quaranta motioned to approve the May 12 th meeting minutes. Mary Lyon seconded the motion. There was no opposition. The Workgroup approved the minutes.		
4.	Action: Approval of Workgroup Charter and Bylaws	Workgroup Members	3:15 PM
	Josh Wojcik reviewed changes to the Workgroup charter and bylaws reflecting member comments during the prior meeting. Joe Quaranta motioned to approve the charter and bylaws. Susan Smith seconded the motion. There was no opposition. The Workgroup approved the charter and bylaws.		
5.	Healthcare Spending Trend Analyses	Bailit Health	3:20 PM
	Michael Bailit reminded the group of the differences between cost growth benchmark analyses and data use strategy analyses and briefly re-reviewed the pre-benchmark findings.		
	Michael Bailit then reviewed the more granular cost driver analyses performed by Mathematica using All-Payer Claims Database (APCD) data.		
	<ul style="list-style-type: none"> • Joe Quaranta commented that the out-of-pocket spending growth data were impacted by changes in employer decisions on plan design, and changes in employee plan selection. Joe added that these changes lead to individuals forgoing care. • Josh Wojcik commented that it was concerning that inpatient hospital spending was growing along with hospital outpatient and pharmacy spending because he would think that the shift in care settings from inpatient to outpatient would lower hospital inpatient spending. Josh noted that this shift in care settings should also contribute to higher spending per unit for both hospital inpatient and outpatient services. • Michael Bailit explained that he was presenting both case-mix adjusted and unadjusted inpatient discharge growth trends due to research that has shown case-mix scores to be increasing more from coding completeness than from actual changes in the health status of the underlying populations. 		

	<ul style="list-style-type: none"> ○ Mary Lyon noted that the switch from ICD-9 in 2015 to ICD-10 in 2016 could also have had an effect on case-mix score changes between those years. ● Josh Wojcik asked if it would be possible to look at the distribution of the relationship between outpatient payment per service unit and utilization growth for CT hospitals. Josh noted that this would help clarify if lower or higher-priced hospitals were gaining more market share. Michael Bailit noted that this analysis could be performed. ● Joe Quaranta noted that it may actually be desirable to see growth in outpatient surgery spending, as that could reflect moving surgeries from more expensive inpatient to less expensive outpatient settings. Michael Bailit noted that it could be useful to isolate spending growth for services that have always been performed in outpatient settings from those that may have moved to outpatient from inpatient settings. <ul style="list-style-type: none"> ○ Josh Wojcik and Joe Quaranta also suggested comparing the average per unit costs for the surgeries performed in both inpatient and outpatient settings. ○ Olga Armah suggested also looking separately at hospital outpatient and freestanding outpatient facilities. ● Josh Wojcik noted that the figures indicating the interaction of changes in units per member with changes in spending per unit for outpatient service types did not make sense to him. Michael Bailit said he would reach out to Mathematica for the math behind this calculation and share it with the group. <p>Michael Bailit asked for suggested areas of further inquiry or opportunities for cost growth mitigating action.</p> <ul style="list-style-type: none"> ● Olga Armah said that based on the outpatient data, she thought focus was needed on emergency department, outpatient surgery, and radiology spending. Olga reiterated the need to isolate outpatient hospital spending and freestanding outpatient facility spending. ● Joe Quaranta suggested looking at potential regional variation of cost drivers. 		
6.	Commercial Pharmacy Spending Analyses	Bailit Health	3:35 PM
	<i>There was not enough time to discuss this agenda item.</i> Michael Bailit proposed coming back to this topic at the next meeting.		
7.	Upcoming Mathematica Analyses	Bailit Health	3:50 PM
	<i>There was not enough time to discuss this agenda item.</i>		
8.	Wrap-Up and Next Steps	Josh Wojcik	3:55 PM
	<i>There was not enough time to discuss this agenda item.</i>		
9.	<u>Action:</u> Adjournment	Workgroup Members	4:00 PM
	Joe Quaranta motioned to adjourn. Olga Armah seconded the motion. The meeting adjourned at 4:00 pm.		

Upcoming Meeting Dates:

- July 20, 2022**
- August 17, 2022**
- September 21, 2022**
- October 19, 2022**
- November 16, 2022**
- December 21, 2022**

All meeting information and materials are published on the OHS website located at:

<https://portal.ct.gov/OHS/Pages/Data-Analytics-Workgroup>